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| <b>PHA 5-Year and Annual Plan</b> | <b>U.S. Department of Housing and Urban Development<br/>Office of Public and Indian Housing</b> | <b>OMB No. 2577-0226<br/>Expires 4/30/2011</b> |
|-----------------------------------|---|--|

|            |   |                    |                    |                    |                    |        |
|------------|---|--------------------|--------------------|--------------------|--------------------|--------|
| <b>1.0</b> | <b>PHA Information</b><br>PHA Name: <u>Housing Authority of Union City</u> PHA Code: <u>GA197</u><br>PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8)<br>PHA Fiscal Year Beginning: (MM/YYYY): <u>1/2010</u>   |                    |                    |                    |                    |        |
| <b>2.0</b> | <b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above)<br>Number of PH units: <u>16</u> Number of HCV units: _____  |                    |                    |                    |                    |        |
| <b>3.0</b> | <b>Submission Type</b><br><input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only  |                    |                    |                    |                    |        |
| <b>4.0</b> | <b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)   |                    |                    |                    |                    |        |
|            | Participating PHAs  | Participating PHAs | Participating PHAs | Participating PHAs | Participating PHAs |        |
|            | PHA 1:  | PHA 1:             | PHA 1:             | PHA 1:             | PHA 1:             | PHA 1: |
|            | PHA 2:  | PHA 2:             | PHA 2:             | PHA 2:             | PHA 2:             | PHA 2: |
|            | PHA 3:  | PHA 3:             | PHA 3:             | PHA 3:             | PHA 3:             | PHA 3: |
| <b>5.0</b> | <b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.  |                    |                    |                    |                    |        |
| <b>5.1</b> | <b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <b>It is the mission for the Housing Authority of Union City to provide and maintain decent, safe, sanitary and economically affordable housing. To serve as a resource to residents and the community by working in harmony with various civic and community organizations that promotes and encourages efforts towards self-sufficiency and improved living standards</b>  |                    |                    |                    |                    |        |
| <b>5.2</b> | <b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.<br><br>PHA Goal #1-Improve the REAC Inspection Score by 5 points – January 16, 2009 - 23<br>Objectives:<br>1. Implement comprehensive Preventive Maintenance Program<br>2. Encourage residents to be involved in the decision making process<br><br>PHA Goal #2 – Enhance the attractiveness and marketability of the housing stock and neighborhoods in order to attract working families.<br>Objectives:<br>1. Update Occupancy and Leasing Documents-The Authority will update ACOP, Dwelling Lease, Rules and Regulations as needed and ensure that all residents understand what is required of them and what services the Authority will provide.<br>2. Lease Enforcement – The Authority will ensure that the Lease is swiftly and strictly enforced, including but not limited to, the collection of rent and a timely manner; additional charges for delinquent rent, unacceptable housekeeping, and trash in the yards; and swift enforcement against those residents engaging in criminal activity.<br>3. Curb Appeal and Maintenance-The Authority will ensure that the curb appeal of each community is maintained at an acceptable marketable level and that routine maintenance is performed within acceptable times.<br><br>PHA Goal #3 – Investigate redevelopment alternatives, identify professional support and quantify sources of funding.<br>Objectives:<br>1. The Authority will acquire and or develop new affordable housing resources.<br>2. The Authority will partner with City, Community Development Corporations and or/developers to create additional affordable housing resources and or identify financial resources for affordable housing use. |                    |                    |                    |                    |        |

## PHA Plan Update

- (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: **Sections: 5.2; 8.0; 9.0; 10 & 11.**
- (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. **The Plan will be available at the Housing Authority's Adm. Office located at 48 Ball Street, Newnan, GA and it will also be available at City Hall, Union City, GA. The member of the Advisory Board will be given a copy of the Five-Year Plan.**

### PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.12 (b), 903.7 (b)]

#### **1. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

**(1) Eligibility – The Housing Authority of Union City verifies eligibility for admission when families are within a certain number of being offered a unit. (Top 5) The Authority screen all applicants for criminal or drug-related activity, rental history and housekeeping to establish eligibility for admission**

**(2) Waiting List Organization – The Housing Authority utilize a community-wide waiting list. When the waiting is open a applicant will call the office and applications are mailed.**

**(3) Assignment – All applicants are given one vacant unit choice before they fall to the bottom of or are removed from the waiting list.**

**(4) Admissions Preferences – The Housing Authority do not plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income. Transfers will be given precedence over new admissions**

#### **2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year.

The Housing Authority of Union City anticipates the following Financial Resources: Rental Income \$36,492 Public Housing Operating Fund-\$48, 225; Public Housing Capital Fund-\$23,909 and Bond Issue Fees-\$26,250. The total funds anticipated are \$134,876. The funds listed above will be used to support the daily operations of the Authority to include Administration and Maintenance functions of the Authority.

#### **3. PHA Rent Determination Policies**

[24 CFR Part 903.12(b), 903.7(d)]

##### **(1) Income Based Rent Policies**

Describe the PHA's income based rent setting policies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

The Housing Authority will not employ any discretionary rent-setting policies for income-based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent. The Authority will charge a minimum rent of \$50. The Authority will give consideration for verified hardships.

Between income reexaminations, the tenants must report changes in income or family composition to the PHA such that the changes result in an adjustment to rent any time the family experiences an income increase.

The Authority will utilize Flat Rents determined by a market comparability study which will be completed by a consultant.

#### **4. Operations and Management**

[24 CFR Part 903.7 9 (e)]

The Housing Authority of Union City has a management contract with the Housing Authority of Newnan. The Executive Director, Sandra M. Strozier oversees all operations of the Authority. The Housing Management is performed by the Area Manager and all maintenance is performed by the maintenance staff of the Housing Authority of Newnan. (See Attachment )

The Housing Authority of Union City has 16 Public Housing Units and anticipates no turnover for the coming year.

#### **Management and Maintenance Policies**

6.0

The Housing will followed established Standard Operating Procedures that govern Management, Maintenance, pest control and all operation of the Authority.

6.0

### **5. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

All grievances shall be heard by the Housing Authority's Hearing Officer appointed to hear such matters. The Hearing Officer is empowered to rule on the grievance in the manner and in accordance with the time frames which are set forth in the Policy. Prior to initiating a formal grievance, the resident must seek to have the grievance resolved informally. The complaint must be in writing and submitted to the Administrative Office within ten (10) days from the date when the grievance arose. The informal discussion must be held within seven (7) days and there must be an attempt to resolve the complaint without a formal hearing. A summary of the discussion shall be prepared by the Authority within ten (10) days after the discussion. If the resident disagrees with the decision of the informal discussion the resident can file a request for a Grievance Hearing. The resident shall be entitled to a fair and private hearing and may be represented by legal counsel or another person chosen as a representative. At the hearing the resident should show why the Authority's proposed action is improper. The burden of proof will then be on the Authority to justify the action or inaction proposed by it. The decision of the Hearing Officer shall be based solely and exclusively upon the facts and documents presented at the hearing. The decision shall be issued in writing within ten (10) calendar days after the hearing. The decision of the Hearing Officer shall be binding upon the parties unless such decision violated Federal Regulations or the Grievance Policy. Should this be the case the decision will be amended. The Final Decision can be appealed to the Executive Director within seven day. The Executive Director will issue a written decision within a reasonable period after consideration of the appeal.

### **6. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities**

[24 CFR Part 903.7 9 (i)]

The Housing Authority does not have Public Housing units designated for Elderly Families or Families with disabilities. The Authority do not plan to apply for and occupancy designation.

### **7. PHA Community Service and Self-sufficiency Programs**

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

- 1) The Housing Authority does not have any programs relating to services and amenities provided or offered to all families.
- 2) The Housing Authority does not have any policies or programs for the enhancement of the economic and social self-sufficiency of the residents.
- 3) The Housing Authority will comply with the requirements of community service regulations.

### **8. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

The Housing Authority will institute measures to ensure the safety of all residents. Management has observed low level of crime and vandalism on the property. All incidents are reported to the Authority by residents and police reports. The Authority has established a relationship with the local police department they provide incident reports on a regular basis. The Authority provides activities for the youth and adults to encourage resident interaction.

**9. Pets – Housing Authority residents who desire to keep a pet may only do so in strict accordance with the procedures described in the Pet Policy. Residents are permitted to keep only common household pets excluding: Birds of Prey, overly aggressive cats, fighting dogs, vicious dogs. Residents must have a Per Permit before housing any pet in a Authority apartment. The resident must pay an application fee and deposit and comply with all rules and regulation related to all pets.**

### **10. Civil Rights Certifications**

[24 CFR Part 903.12 (b), 903.7 (o)]

The Housing Authority certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, Section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990 and will affirmatively further fair housing.—see Attachment

### **11. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

The Housing Authority has a audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)). The Audit was submitted to HUD and there were no Audit findings.

### **12. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

The Authority plans to engage in activities that will contribute to the long-term asset management of its public housing stock. The Authority conducted a comprehensive stock assessment to determine the rehabilitation needs of the Authority. The Authority will prioritize all rehabilitation needs and complete required work as funds become available.

### **13. Violence Against Women Act (VAWA) – See Attachment**

The mission of the Housing Authority of Union City is to provide a safe environment for women and their children free from domestic violence. The

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| 6.0 | <p><b><u>13. Violence Against Women Act (VAWA) – See Attachment</u></b></p> <p>The mission of the Housing Authority of Union City is to provide a safe environment for women and their children free from domestic violence. To promote emergency and short term transitional housing, economic opportunity and a suitable living environment free from discrimination and abuse.</p> <p>The objectives will be accomplished by establishing a partnership with local Community Agencies that provide Medical, Social Work, Counseling, Budgeting, Food, Clothing, Furniture, Life Skills, Interview skills, Job Search and Coping skills.</p> <p>The Authority will assist abused families to find suitable permanent housing and assist the family with self-sufficiency, independent of abuser.</p>  |
| 7.0 | <p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. N/A.</b></p>  |
| 8.0 | <p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>   |
| 8.1 | <p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing. <b>See Attachment</b></p>  |
| 8.2 | <p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. <b>See Attachment</b></p>  |
| 8.3 | <p><b>Capital Fund Financing Program (CFFP).</b><br/> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. N/A</p>  |
| 9.0 | <p><b><u>Housing Needs.</u></b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>According to the 2000 Consolidated Plan of Fulton County, Fulton County has 27,843 families with incomes less than or equal to 30% of the AMI. Union City has 218 homeowners and 729 renters are cost burdened. Over 40.7% of the renters in Union City are severely cost burdened.</p> <p>The Housing Authority has 56 families on the waiting list. All of the families have incomes less than or equal to 30% of the AMI. Forty-five families have children, three are elderly and one applicant is disable. Of the fifty-six families, fifty-three are black, two white and one Hispanic.</p> |
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| 9.1  | <p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> |
|  | <p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> |
|  | <p><b>(1) Strategies</b></p>  |
|  | <p><b>Need: Shortage of affordable housing for all eligible populations</b></p>   |
|  | <p><b>Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:</b></p>   |
|  | <p>Select all that apply</p>  |
|  | <p>X      Employ effective maintenance and management policies to minimize the number of public housing units off-line</p>  |
|  | <p>X      Reduce turnover time for vacated public housing units</p>   |
|  | <p>X      Reduce time to renovate public housing units</p>  |
|  | <p><b>Strategy 2: Increase the number of affordable housing units by:</b></p>   |
|  | <p>Select all that apply</p>  |
|  | <p>X      Leverage affordable housing resources in the community through the creation of mixed - finance housing</p>  |
| <p>X      Pursue housing resources other than public housing or Section 8 tenant-based assistance.</p>               |   |
| <p><b>Need: Specific Family Types: Families at or below 30% of median</b></p>  |   |
| <p><b>Strategy 1: Target available assistance to families at or below 30 % of AMI</b></p>                            |   |
| <p>Select all that apply</p>   |   |
| <p>X      Adopt rent policies to support and encourage work</p>  |   |
| <p><b>Need: Specific Family Types: Families at or below 50% of median</b></p>  |   |
| <p><b>Strategy 1: Target available assistance to families at or below 50% of AMI</b></p>                             |   |
| <p>Select all that apply</p>   |   |
| <p>X      Adopt rent policies to support and encourage work</p>  |   |
| <p><b>Other Housing Needs &amp; Strategies: (list needs and strategies below)</b></p>                                |   |
| <p><b>(2) Reasons for Selecting Strategies</b></p>   |   |
| <p>Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:</p> |   |
| <p>X      Funding constraints</p>  |   |
| <p>X      Staffing constraints</p>   |   |
| <p>X      Extent to which particular housing needs are met by other organizations in the community</p>               |   |

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| 10.0 | <p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <ol style="list-style-type: none"> <li>1. PHA Goal : Improve the REAC Inspection Score by 20 points – January 16, 2009 – Score went from 46% to 76%</li> <li>2. PHA Goal: Expand the supply of assisted housing – May 2009 - The Housing Authority reduced vacancy turnaround days from 32 days to 17 days</li> <li>3. PHA Goal: Improve the quality of assisted housing - Security Screen doors were installed on all units.</li> <li>4. PHA Goal: Enhance the attractiveness and marketability of the housing stock and neighborhoods in order to attract working families. – <ul style="list-style-type: none"> <li>• The PHA updated the Occupancy and Leasing Documents - ACOP, Dwelling Lease, Rules and Regulations and ensure that all residents understand what is required of them and what services the Authority will provide.</li> <li>• Lease Enforcement – The Authority ensures that the Lease is swiftly and strictly enforced, including but not limited to, the collection of rent and a timely manner; additional charges for delinquent rent, unacceptable housekeeping, and trash in the yards; and swift enforcement against those residents engaging in criminal activity.</li> <li>• Curb Appeal and Maintenance-The Authority ensures that the curb appeal of each community is maintained at an acceptable marketable level and that routine maintenance is performed within acceptable times.</li> </ul> </li> <li>5. PHA Goal: Investigate redevelopment alternatives, identify professional support and quantify sources of funding. The Authority joined with the Housing Authority of Newnan to apply for NSP2 Funds</li> </ol> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b><u>HUC FY2010 - 2014 Five-Year Plan.</u></b></p> <p>A "substantial deviation" or "significant amendment or modification" to HUC's FY2010 – 2014ive-Year Plan ("Five-Year Plan") is defined as substantial changes, modifications, or amendments to the Five-Year Plan that materially and significantly modify HUC's goals listed in Section B of the Five-Year Plan. A change in HUC's objectives or strategies in reaching those goals will not be considered a "substantial deviation" or "significant amendment or modification." Other than for "substantial deviation" or "significant amendment or modifications," as defined above, HUC may make changes to its Five-Year Plan without the necessity of re-submitting the entire Five-Year Plan document, conducting a public hearing, or otherwise engaging in Five-Year Plan Resident Advisory Board or resident consultation.</p> <p><b><u>HUC FY2010 Annual Plan.</u></b></p> <p>A "substantial deviation" or "significant amendment or modification" to HUC's FY2010 Annual Plan ("Annual Plan") is defined as substantial changes, modifications, or amendments to the Annual Plan that materially and significantly modify HUC's goals listed in Section B of the Five-Year Plan or materially and significantly modify the strategies outlined in the Annual Plan. Notwithstanding the foregoing, HAN may, from time to time, make changes in the Annual Plan and any attachments thereto, in order to maximize the flexibility provided for in the regulations of the programs administered by HAN and included in the FY 2010 Annual Plan and such changes shall not be considered a "substantial deviation" or a "significant amendment or modification." Specifically, HAN anticipates that it may need to make changes to its Physical Needs Assessment and/or Management Needs Assessment and/or Capital Fund plans and expenditures from time to time, (including, but not limited to, a change in use of replacement reserve funds under the Capital Fund) and such changes shall not be deemed to be a "substantial deviation or a "significant amendment or modification" to the FY 2010 Annual Plan.</p> |
| 11.0 | <p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) – <b>See Attachment</b></p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) - <b>See Attachment</b></p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) - <b>See Attachment</b></p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) - <b>See Attachment</b></p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) - <b>See Attachment</b></p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. - <b>See Attachment</b></p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) - <b>See Attachment</b></p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) - <b>See Attachment</b></p>  |

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

|   |   |  |
|---|---|--|
| <b>PHA Name:</b><br>Housing Authority of Union City | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: GA06P0197501-10<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | <b>FFY of Grant: 2010</b><br><b>FFY of Grant Approval:</b> |
|---|---|--|

**Type of Grant**  
☒ Original Annual Statement      ☐ Reserve for Disasters/Emergencies      ☐ Revised Annual Statement (revision no: )  
☐ Performance and Evaluation Report for Period Ending:      ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account                               | Total Estimated Cost |                      | Total Actual Cost <sup>1</sup> |          |
|------|--|----------------------|----------------------|--------------------------------|----------|
|      |  | Original             | Revised <sup>2</sup> | Obligated                      | Expended |
| 1    | Total non-CFP Funds  | \$0                  |                      |                                |          |
| 2    | 1406 Operations (may not exceed 20% of line 21) <sup>3</sup> | \$1,000              |                      |                                |          |
| 3    | 1408 Management Improvements                                 | \$0                  |                      |                                |          |
| 4    | 1410 Administration (may not exceed 10% of line 21)          | \$0                  |                      |                                |          |
| 5    | 1411 Audit   | \$0                  |                      |                                |          |
| 6    | 1415 Liquidated Damages                                      | \$0                  |                      |                                |          |
| 7    | 1430 Fees and Costs  | \$1,000              |                      |                                |          |
| 8    | 1440 Site Acquisition  | \$00                 |                      |                                |          |
| 9    | 1450 Site Improvement  | \$1,500              |                      |                                |          |
| 10   | 1460 Dwelling Structures                                     | \$11,500             |                      |                                |          |
| 11   | 1465.1 Dwelling Equipment—Nonexpendable                      | \$0                  |                      |                                |          |
| 12   | 1470 Non-dwelling Structures                                 | \$8,909              |                      |                                |          |
| 13   | 1475 Non-dwelling Equipment                                  | \$0                  |                      |                                |          |
| 14   | 1485 Demolition  | \$0                  |                      |                                |          |
| 15   | 1492 Moving to Work Demonstration                            | \$0                  |                      |                                |          |
| 16   | 1495.1 Relocation Costs                                      | \$0                  |                      |                                |          |
| 17   | 1499 Development Activities <sup>4</sup>                     | \$0                  |                      |                                |          |

<sup>1</sup> To be completed for the Performance and Evaluation Report.

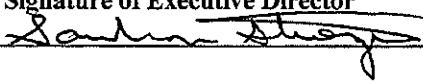
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 4/30/2011

| <b>Part I: Summary</b>   |  |   |   |   |          |
|--|--|---|---|---|----------|
| <b>PHA Name:</b><br><b>Housing Authority of Union City</b>   |  | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: GA06P0197501-10<br>Replacement Housing Factor Grant No:<br>Date of CFFP: |   | <b>FFY of Grant:2010</b><br><b>FFY of Grant Approval:</b> |          |
| <b>Type of Grant</b><br><input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )<br><input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report |  |   |   |   |          |
| Line   | Summary by Development Account   | Total Estimated Cost  |   | Total Actual Cost <sup>1</sup>                            |          |
|  |  | Original  | Revised <sup>2</sup>                                | Obligated   | Expended |
| 18a  | 1501 Collateralization or Debt Service paid by the PHA                   |   |   |   |          |
| 18ba   | 9000 Collateralization or Debt Service paid Via System of Direct Payment |   |   |   |          |
| 19   | 1502 Contingency (may not exceed 8% of line 20)                          |   |   |   |          |
| 20   | Amount of Annual Grant:: (sum of lines 2 - 19)                           | \$23,909  |   |   |          |
| 21   | Amount of line 20 Related to LBP Activities                              |   |   |   |          |
| 22   | Amount of line 20 Related to Section 504 Activities                      |   |   |   |          |
| 23   | Amount of line 20 Related to Security - Soft Costs                       |   |   |   |          |
| 24   | Amount of line 20 Related to Security - Hard Costs                       |   |   |   |          |
| 25   | Amount of line 20 Related to Energy Conservation Measures                |   |   |   |          |
| <b>Signature of Executive Director</b><br>  |  | <b>Date</b><br>2/17/10  | <b>Signature of Public Housing Director</b><br><br> |   |          |
|  |  |   | <b>Date</b>   |   |          |

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.



[illegible]

<sup>2</sup> To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
**Expires 4/30/2011**

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name:

| Development Number | Name/PHA-Wide Activities |
|--------------------|--------------------------|
|                    |                          |

All Funds Expended  
(Quarter Ending Date)

Reasons for Revised Target Dates <sup>1</sup>

Original  
Obligation End  
Date

Actual Obligation  
End Date

|  |                      |
|--|----------------------|
|  | Original Expenditure |
|  | End Date             |

Actual Expenditure End  
Date

# Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011

| <b>Part I: Summary</b> |  |  |  |  |   |  |
|------------------------|--|--|--|--|---|--|
| PHA Name/Number        |  |  | Locality (City/County & State)               |  | <input type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b> |  |
| A.                     | Development Number and Name                    | Work Statement for Year 1<br>FFY <u>2010</u> | Work Statement for Year 2<br>FFY <u>2011</u> | Work Statement for Year 3<br>FFY <u>2012</u> | Work Statement for Year 4<br>FFY <u>2013</u>  | Work Statement for Year 5<br>FFY <u>2014</u> |
| B.                     | Physical Improvements Subtotal                 | Annual Statement                             |  |  |   |  |
| C.                     | Management Improvements                        |  |  |  |   |  |
| D.                     | PHA-Wide Non-dwelling Structures and Equipment |  |  |  |   |  |
| E.                     | Administration                                 |  |  |  |   |  |
| F.                     | Other  |  |  |  |   |  |
| G.                     | Operations                                     |  |  |  |   |  |
| H.                     | Demolition                                     |  |  |  |   |  |
| I.                     | Development                                    |  |  |  |   |  |
| J.                     | Capital Fund Financing – Debt Service          |  |  |  |   |  |
| K.                     | Total CFP Funds                                |  |  |  |   |  |
| L.                     | Total Non-CFP Funds                            |  |  |  |   |  |
| M.                     | Grand Total                                    |  |  |  |   |  |

**Capital Fund Program—Five-Year Action Plan**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/20011

| <b>Part I: Summary (Continuation)</b>             |                             |  |  |  |  |  |
|---|-----------------------------|--|--|--|--|--|
| PHA Name/Number – Housing Authority of Union City |                             |  | Locality (City/county & State)<br>Union City, GA - Fulton Co.  |  | <input checked="" type="checkbox"/> <b>X Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>                               |  |
| A.  | Development Number and Name | Work Statement for Year 1<br>FFY <u>2010</u> | Work Statement for Year 2<br>FFY <u>2011</u>   | Work Statement for Year 3<br>FFY <u>2012</u>   | Work Statement for Year 4<br>FFY <u>2013</u>   | Work Statement for Year 5<br>FFY <u>2014</u>   |
|   | GA 197/PHA Wide             | <b>Annual Statement</b>                      | Operations   | Operations   | Operations   | Operations   |
|   | GA 197/PHA Wide             |  | Clerk of Works/Consultant Fees/A/E Fees  | Clerk of Works/Consultant Fees/A/E Fees  | Clerk of Works/Consultant Fees/A/E Fees  | Clerk of Works/Consultant Fees/A/E Fees  |
|   | GA 197/PHA Wide             |  | Landscape/Erosion Control  | Landscape/Erosion Control  | Landscape/Erosion Control  | Landscape/Erosion Control  |
|   | GA 197/PHA Wide             |  | Roofing, fascia, soffits, exterior trim, gable porches, cloumns, exterior paint shutters   | Roofing, fascia, soffits, exterior trim, gable porches, cloumns, exterior paint shutters   | Roofing, fascia, soffits, exterior trim, gable porches, cloumns, exterior paint shutters   | Roofing, fascia, soffits, exterior trim, gable porches, cloumns, exterior paint shutters   |
|   | GA 197/PHA Wide             |  | Substantial Renovation of 1 units, Roofing, Kitchen, Bathrooms, all doors, flooring, walls, ceilings, plumbing, electrical, mechanical, HCAC | Substantial Renovation of 1 units, Roofing, Kitchen, Bathrooms, all doors, flooring, walls, ceilings, plumbing, electrical, mechanical, HCAC | Substantial Renovation of 1 units, Roofing, Kitchen, Bathrooms, all doors, flooring, walls, ceilings, plumbing, electrical, mechanical, HCAC | Substantial Renovation of 1 units, Roofing, Kitchen, Bathrooms, all doors, flooring, walls, ceilings, plumbing, electrical, mechanical, HCAC |
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**U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/20011**

| Work Statement for Year 1 FFY <u>2010</u> | Work Statement for Year <u>2</u><br>FFY <u>2011</u>  |                            |                | Work Statement for Year: <u>3</u><br>FFY <u>2012</u>   |                            |                |
|---|--|----------------------------|----------------|--|----------------------------|----------------|
|   | Development Number/Name<br>General Description of Major Work Categories  | Quantity                   | Estimated Cost | Development Number/Name<br>General Description of Major Work Categories  | Quantity                   | Estimated Cost |
| See                                       | Operations   |                            | \$ 1,000       | Operations   |                            | \$ 1,000       |
| Annual                                    | Clerk of Works/Consultant Fees/A/E Fees  | 1                          | \$ 1,000       | Clerk of Works/Consultant Fees/A/E Fees  |                            | \$ 1,000       |
| Statement                                 | Landscape/Erosion Control  | 1                          | \$ 500         | Landscape/Erosion Control  |                            | \$ 500         |
|   | Roofing, fascia, soffits, exterior trim, gable porches, cloumns, exterior paint shutters   | 1                          | \$1,000        | Roofing, fascia, soffits, exterior trim, gable porches, cloumns, exterior paint shutters   |                            | \$1,000        |
|   | Substantial Renovation of 1 units, Roofing, Kitchen, Bathrooms, all doors, flooring, walls, ceilings, plumbing, electrical, mechanical, HVAC |                            | \$23,409       | Substantial Renovation of 1 units, Roofing, Kitchen, Bathrooms, all doors, flooring, walls, ceilings, plumbing, electrical, mechanical, HVAC |                            | \$23,409       |
|   |  |                            |                |  |                            |                |
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|   |  |                            |                |  |                            |                |
|   |  | Subtotal of Estimated Cost | \$23,909       |  | Subtotal of Estimated Cost | \$23,909       |
|   |  |                            |                |  |                            |                |

**Capital Fund Program—Five-Year Action Plan**

**U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011**

| <b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b> |  |                            |                |  |                            |                |
|---|--|----------------------------|----------------|--|----------------------------|----------------|
| Work Statement for Year 1 FFY <u>2010</u>                           | Work Statement for Year <u>4</u><br>FFY <u>2013</u>  |                            |                | Work Statement for Year: <u>5</u><br>FFY <u>2014</u>   |                            |                |
|   | Development Number/Name<br>General Description of Major Work Categories  | Quantity                   | Estimated Cost | Development Number/Name<br>General Description of Major Work Categories  | Quantity                   | Estimated Cost |
| See   | Operations   |                            | \$ 1,000       | Operations   |                            | \$ 1,000       |
| Annual  | Clerk of Works/Consultant Fees/A/E Fees  |                            | \$ 1,000       | Clerk of Works/Consultant Fees/A/E Fees  |                            | \$ 1,000       |
| Statement   | Landscape/Erosion Control  |                            | \$ 500         | Landscape/Erosion Control  |                            | \$ 500         |
|   | Roofing, fascia, soffits, exterior trim, gable porches, cloumns, exterior paint shutters   |                            | \$1,000        | Roofing, fascia, soffits, exterior trim, gable porches, cloumns, exterior paint shutters   |                            | \$1,000        |
|   | Substantial Renovation of 1 units, Roofing, Kitchen, Bathrooms, all doors, flooring, walls, ceilings, plumbing, electrical, mechanical, HVAC |                            | \$23,409       | Substantial Renovation of 1 units, Roofing, Kitchen, Bathrooms, all doors, flooring, walls, ceilings, plumbing, electrical, mechanical, HVAC |                            | \$23,409       |
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|   |  | Subtotal of Estimated Cost | \$23,909       |  | Subtotal of Estimated Cost | \$23,909       |

**Capital Fund Program—Five-Year Action Plan**

**U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011**

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| Part III: Supporting Pages – Management Needs Work Statement(s) |   |                |   |                |
|---|---|----------------|---|----------------|
| Work Statement for Year 1 FFY _____                             | Work Statement for Year _____<br>FFY _____                              |                | Work Statement for Year: _____<br>FFY _____                             |                |
|   | Development Number/Name<br>General Description of Major Work Categories | Estimated Cost | Development Number/Name<br>General Description of Major Work Categories | Estimated Cost |
| See   |   |                |   |                |
| Annual  |   |                |   |                |
| Statement   |   |                |   |                |
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|   | Subtotal of Estimated Cost  | \$             | Subtotal of Estimated Cost  | \$             |

**Part III: Supporting Pages – Management Needs Work Statement(s)**

| Work<br>Statement for<br>Year 1 FFY<br>_____ | Work Statement for Year _____<br>FFY _____                              |                | Work Statement for Year: _____<br>FFY _____                             |                |
|--|---|----------------|---|----------------|
|  | Development Number/Name<br>General Description of Major Work Categories | Estimated Cost | Development Number/Name<br>General Description of Major Work Categories | Estimated Cost |
| See  |   |                |   |                |
| Annual                                       |   |                |   |                |
| Statement                                    |   |                |   |                |
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|  | Subtotal of Estimated Cost  | \$             | Subtotal of Estimated Cost  | \$             |

December 3, 2009

PHA 5-Year and Annual Plan – Housing Authority of Union City

Section 11.0

- (g) Challenged Elements. The Housing Authority of Union City do not have any Challenged Elements.



Sandra M. Strozier, Executive Director

# DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

Approved by OMB

0348-0046

|  |  |   |  |  |  |
|--|--|---|--|--|--|
| <b>1. Type of Federal Action:</b><br><input checked="checked" type="checkbox"/> a. contract<br><input type="checkbox"/> b. grant<br><input type="checkbox"/> c. cooperative agreement<br><input type="checkbox"/> d. loan<br><input type="checkbox"/> e. loan guarantee<br><input type="checkbox"/> f. loan insurance  |  | <b>2. Status of Federal Action:</b><br><input checked="checked" type="checkbox"/> a. bid/offer/application<br><input type="checkbox"/> b. initial award<br><input type="checkbox"/> c. post-award |  | <b>3. Report Type:</b><br><input checked="checked" type="checkbox"/> a. initial filing<br><input type="checkbox"/> b. material change<br><b>For Material Change Only:</b><br>year _____ quarter _____<br>date of last report _____ |  |
| <b>4. Name and Address of Reporting Entity:</b><br><input checked="checked" type="checkbox"/> Prime <input type="checkbox"/> Subawardee<br>Tier _____, if known:<br><br>Congressional District, if known: 4c   |  |   | <b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b><br><br>Congressional District, if known:  |  |  |
| <b>6. Federal Department/Agency:</b><br>U. S. Department of HUD  |  |   | <b>7. Federal Program Name/Description:</b><br><br>CFDA Number, if applicable: _____   |  |  |
| <b>8. Federal Action Number, if known:</b>   |  |   | <b>9. Award Amount, if known:</b><br>\$  |  |  |
| <b>10. a. Name and Address of Lobbying Registrant</b><br>(if individual, last name, first name, MI):   |  |   | <b>b. Individuals Performing Services</b> (including address if different from No. 10a)<br>(last name, first name, MI):  |  |  |
| <b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. |  |   | Signature: <u>Sandra M. Strozier</u><br>Print Name: <u>Sandra M. Strozier</u><br>Title: <u>Executive Director</u><br>Telephone No.: <u>770 253-6461</u> Date: <u>9/16/2009</u> |  |  |
| <b>Federal Use Only:</b>   |  |   |  | Authorized for Local Reproduction<br>Standard Form LLL (Rev. 7-97)   |  |

**DISCLOSURE OF LOBBYING ACTIVITIES  
CONTINUATION SHEET**

Approved by OMB  
0348-0046

Reporting Entity: Housing Authority of Union City Page 1 of 1

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

|   |   |  |
|---|---|--|
| <b>PHA Name:</b><br>Housing Authority of Union City | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: GA06P0197501-08<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | <b>FFY of Grant: 2008</b><br><b>FFY of Grant Approval:</b> |
|---|---|--|

Type of Grant  
☐ Original Annual Statement      ☐ Reserve for Disasters/Emergencies      ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: 6/30/09      ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account                               | Total Estimated Cost |                      | Total Actual Cost <sup>1</sup> |          |
|------|--|----------------------|----------------------|--------------------------------|----------|
|      |  | Original             | Revised <sup>2</sup> | Obligated                      | Expended |
| 1    | Total non-CFP Funds  | \$0                  |                      | \$0                            | \$0      |
| 2    | 1406 Operations (may not exceed 20% of line 21) <sup>3</sup> | \$4,797              |                      | \$0                            | \$0      |
| 3    | 1408 Management Improvements                                 | \$0                  |                      | \$0                            | \$0      |
| 4    | 1410 Administration (may not exceed 10% of line 21)          | \$0                  |                      | \$0                            | \$0      |
| 5    | 1411 Audit   | \$0                  |                      | \$0                            | \$0      |
| 6    | 1415 Liquidated Damages                                      | \$0                  |                      | \$0                            | \$0      |
| 7    | 1430 Fees and Costs  | \$0                  |                      | \$0                            | \$0      |
| 8    | 1440 Site Acquisition  | \$0                  |                      | \$0                            | \$0      |
| 9    | 1450 Site Improvement  | \$0                  |                      | \$0                            | \$0      |
| 10   | 1460 Dwelling Structures                                     | \$19,189             |                      | \$0                            | \$0      |
| 11   | 1465.1 Dwelling Equipment—Nonexpendable                      | \$0                  |                      | \$0                            | \$0      |
| 12   | 1470 Non-dwelling Structures                                 | \$0                  |                      | \$0                            | \$0      |
| 13   | 1475 Non-dwelling Equipment                                  | \$0                  |                      | \$0                            | \$0      |
| 14   | 1485 Demolition  | \$0                  |                      | \$0                            | \$0      |
| 15   | 1492 Moving to Work Demonstration                            | \$0                  |                      | \$0                            | \$0      |
| 16   | 1495.1 Relocation Costs                                      | \$0                  |                      | \$0                            | \$0      |
| 17   | 1499 Development Activities <sup>4</sup>                     | \$0                  |                      | \$0                            | \$0      |

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

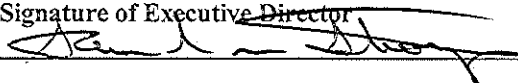
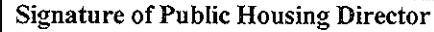
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| <b>PHA Name:</b><br>Housing Authority<br>of Union City | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: GA06P0197501-08<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | <b>FFY of Grant:</b> 2008<br><b>FFY of Grant Approval:</b> |
|--|---|--|

**Type of Grant**

☐ Original Annual Statement
 ☐ Reserve for Disasters/Emergencies
 ☐ Revised Annual Statement (revision no: )

☒ Performance and Evaluation Report for Period Ending: 6/30/09
 ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account   | Total Estimated Cost |                      | Total Actual Cost <sup>1</sup> |          |
|------|--|----------------------|----------------------|--------------------------------|----------|
|      |  | Original             | Revised <sup>2</sup> | Obligated                      | Expended |
| 18a  | 1501 Collateralization or Debt Service paid by the PHA                   |                      |                      |                                |          |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment |                      |                      |                                |          |
| 19   | 1502 Contingency (may not exceed 8% of line 20)                          |                      |                      |                                |          |
| 20   | Amount of Annual Grant:: (sum of lines 2 - 19)                           | \$23,986             |                      |                                |          |
| 21   | Amount of line 20 Related to LBP Activities                              |                      |                      |                                |          |
| 22   | Amount of line 20 Related to Section 504 Activities                      |                      |                      |                                |          |
| 23   | Amount of line 20 Related to Security - Soft Costs                       |                      |                      |                                |          |
| 24   | Amount of line 20 Related to Security - Hard Costs                       |                      |                      |                                |          |
| 25   | Amount of line 20 Related to Energy Conservation Measures                |                      |                      |                                |          |

|  |                        |  |             |
|--|------------------------|--|-------------|
| <b>Signature of Executive Director</b><br> | <b>Date</b><br>2/17/10 | <b>Signature of Public Housing Director</b><br> | <b>Date</b> |
|--|------------------------|--|-------------|

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.



[illegible]

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

PHA Name: Housing Authority of Union City

[illegible]

Page5

PHA Name:

Reasons for Revised Target Dates <sup>1</sup>[illegible]

Page6

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

|   |   |  |
|---|---|--|
| <b>PHA Name:</b><br>Housing Authority of Union City | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: GA06P0197501-09<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | <b>FFY of Grant: 2009</b><br><b>FFY of Grant Approval:</b> |
|---|---|--|

Type of Grant  
☐ Original Annual Statement      ☐ Reserve for Disasters/Emergencies      ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: 6/30/09      ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account                               | Total Estimated Cost |                      | Total Actual Cost <sup>1</sup> |          |
|------|--|----------------------|----------------------|--------------------------------|----------|
|      |  | Original             | Revised <sup>2</sup> | Obligated                      | Expended |
| 1    | Total non-CFP Funds  | \$0                  |                      |                                |          |
| 2    | 1406 Operations (may not exceed 20% of line 21) <sup>3</sup> | \$1,000              |                      |                                |          |
| 3    | 1408 Management Improvements                                 | \$0                  |                      |                                |          |
| 4    | 1410 Administration (may not exceed 10% of line 21)          | \$0                  |                      |                                |          |
| 5    | 1411 Audit   | \$0                  |                      |                                |          |
| 6    | 1415 Liquidated Damages                                      | \$0                  |                      |                                |          |
| 7    | 1430 Fees and Costs  | \$1,000              |                      |                                |          |
| 8    | 1440 Site Acquisition  | \$00                 |                      |                                |          |
| 9    | 1450 Site Improvement  | \$1,500              |                      |                                |          |
| 10   | 1460 Dwelling Structures                                     | \$11,500             |                      |                                |          |
| 11   | 1465.1 Dwelling Equipment—Nonexpendable                      | \$0                  |                      |                                |          |
| 12   | 1470 Non-dwelling Structures                                 | \$8,909              |                      |                                |          |
| 13   | 1475 Non-dwelling Equipment                                  | \$0                  |                      |                                |          |
| 14   | 1485 Demolition  | \$0                  |                      |                                |          |
| 15   | 1492 Moving to Work Demonstration                            | \$0                  |                      |                                |          |
| 16   | 1495.1 Relocation Costs                                      | \$0                  |                      |                                |          |
| 17   | 1499 Development Activities <sup>4</sup>                     | \$0                  |                      |                                |          |

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

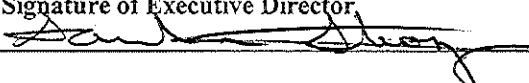
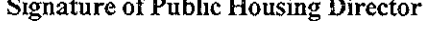
|  |   |   |
|--|---|---|
| <b>PHA Name:</b><br><b>Housing Authority of Union City</b> | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: GA06P0197501-09<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | <b>FFY of Grant:2009</b><br><b>FFY of Grant Approval:</b> |
|--|---|---|

**Type of Grant**

☐ Original Annual Statement
 ☐ Reserve for Disasters/Emergencies
 ☐ Revised Annual Statement (revision no: )

☒ Performance and Evaluation Report for Period Ending: 12/31/09
 ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account   | Total Estimated Cost |                      | Total Actual Cost <sup>1</sup> |          |
|------|--|----------------------|----------------------|--------------------------------|----------|
|      |  | Original             | Revised <sup>2</sup> | Obligated                      | Expended |
| 18a  | 1501 Collateralization or Debt Service paid by the PHA                   |                      |                      |                                |          |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment |                      |                      |                                |          |
| 19   | 1502 Contingency (may not exceed 8% of line 20)                          |                      |                      |                                |          |
| 20   | Amount of Annual Grant:: (sum of lines 2 - 19)                           | \$23,909             |                      |                                |          |
| 21   | Amount of line 20 Related to LBP Activities                              |                      |                      |                                |          |
| 22   | Amount of line 20 Related to Section 504 Activities                      |                      |                      |                                |          |
| 23   | Amount of line 20 Related to Security - Soft Costs                       |                      |                      |                                |          |
| 24   | Amount of line 20 Related to Security - Hard Costs                       |                      |                      |                                |          |
| 25   | Amount of line 20 Related to Energy Conservation Measures                |                      |                      |                                |          |

|  |                        |  |             |
|--|------------------------|--|-------------|
| <b>Signature of Executive Director</b><br> | <b>Date</b><br>2/17/10 | <b>Signature of Public Housing Director</b><br> | <b>Date</b> |
|--|------------------------|--|-------------|

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

[illegible]

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

PHA Name: Housing Authority of Union City

Federal FFY of Grant: 2009

[illegible]

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.



## PHA Name:

Reasons for Revised Target Dates

[illegible]

Page6

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

|   |   |  |
|---|---|--|
| <b>PHA Name:</b><br>Housing Authority of Union City | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: GA06S0197501-09<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | <b>FFY of Grant: 2009</b><br><b>FFY of Grant Approval:</b> |
|---|---|--|

Type of Grant  
☐ Original Annual Statement      ☐ Reserve for Disasters/Emergencies      ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: 6/30/09      ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account                               | Total Estimated Cost |                      | Total Actual Cost <sup>1</sup> |          |
|------|--|----------------------|----------------------|--------------------------------|----------|
|      |  | Original             | Revised <sup>2</sup> | Obligated                      | Expended |
| 1    | Total non-CFP Funds  | \$0                  |                      | \$0                            | \$0      |
| 2    | 1406 Operations (may not exceed 20% of line 21) <sup>3</sup> | \$0                  |                      | \$0                            | \$0      |
| 3    | 1408 Management Improvements                                 | \$0                  |                      | \$0                            | \$0      |
| 4    | 1410 Administration (may not exceed 10% of line 21)          | \$0                  |                      | \$0                            | \$0      |
| 5    | 1411 Audit   | \$0                  |                      | \$0                            | \$0      |
| 6    | 1415 Liquidated Damages                                      | \$0                  |                      | \$0                            | \$0      |
| 7    | 1430 Fees and Costs  | \$1,000              |                      | \$1,000                        | \$640.00 |
| 8    | 1440 Site Acquisition  | \$0                  |                      | \$0                            | \$0      |
| 9    | 1450 Site Improvement  | \$0                  |                      | \$0                            | \$0      |
| 10   | 1460 Dwelling Structures                                     | \$29,361             |                      | \$0                            | \$0      |
| 11   | 1465.1 Dwelling Equipment—Nonexpendable                      | \$0                  |                      | \$0                            | \$0      |
| 12   | 1470 Non-dwelling Structures                                 | \$0                  |                      | \$0                            | \$0      |
| 13   | 1475 Non-dwelling Equipment                                  | \$0                  |                      | \$0                            | \$0      |
| 14   | 1485 Demolition  | \$0                  |                      | \$0                            | \$0      |
| 15   | 1492 Moving to Work Demonstration                            | \$0                  |                      | \$0                            | \$0      |
| 16   | 1495.1 Relocation Costs                                      | \$0                  |                      | \$0                            | \$0      |
| 17   | 1499 Development Activities <sup>4</sup>                     | \$0                  |                      | \$0                            | \$0      |

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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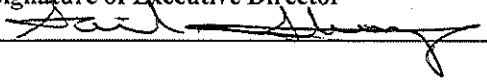
U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

|   |  |   |
|---|--|---|
| PHA Name:<br>Housing Authority<br>of Union City | Grant Type and Number<br>Capital Fund Program Grant No: GA06S0197501-09<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | FFY of Grant:2009<br>FFY of Grant Approval: |
|---|--|---|

Type of Grant  
☒ Original Annual Statement      ☐ Reserve for Disasters/Emergencies      ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: 12/31/09      ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account   | Total Estimated Cost |                      | Total Actual Cost <sup>1</sup> |          |
|------|--|----------------------|----------------------|--------------------------------|----------|
|      |  | Original             | Revised <sup>2</sup> | Obligated                      | Expended |
| 18a  | 1501 Collateralization or Debt Service paid by the PHA                   |                      |                      |                                |          |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment |                      |                      |                                |          |
| 19   | 1502 Contingency (may not exceed 8% of line 20)                          |                      |                      |                                |          |
| 20   | Amount of Annual Grant:: (sum of lines 2 - 19)                           | \$30,361             |                      | \$1000                         | \$640.00 |
| 21   | Amount of line 20 Related to LBP Activities                              |                      |                      |                                |          |
| 22   | Amount of line 20 Related to Section 504 Activities                      |                      |                      |                                |          |
| 23   | Amount of line 20 Related to Security - Soft Costs                       |                      |                      |                                |          |
| 24   | Amount of line 20 Related to Security - Hard Costs                       |                      |                      |                                |          |
| 25   | Amount of line 20 Related to Energy Conservation Measures                |                      |                      |                                |          |

|   |                 |                                      |      |
|---|-----------------|--------------------------------------|------|
| Signature of Executive Director<br> | Date<br>2/17/10 | Signature of Public Housing Director | Date |
|---|-----------------|--------------------------------------|------|

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

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[illegible]

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

PHA Name: Housing Authority of Union City

Reasons for Revised Target Dates <sup>1</sup>

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name:

Reasons for Revised Target Dates

[illegible]

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# Memo

**To:** Vernoise Strother  
**From:** Leesa Thurman  
**CC:** Glynis Tanner  
**Date:** 2/19/2010  
**Re:** Minutes from October 27, 2009 meeting

---

**What:** Union City Resident Advisory Board Meeting

**When:** October 27, 2009

**Time:** 12:30 pm

**Where:** Shoney's in Union City

**In Attendance:** Atoya Garrett, resident; Chisa Mobley, resident; Annie Barlow, Commissioner and resident; Leesa Thurman, staff; Glynis Tanner, staff

**Items Discussed:**

- Overview of annual plan- Glynis explained what it contains and the role of the Advisory Board
- Need for more units/housing- will have to create need in order to purchase homes and/or get more public housing units
- Stressed need to keep units in good condition and report all repairs to be made immediately
- Upcoming redevelopment of current units
- Waiting list currently closed, but shows high demand for more public housing in Union City. Will submit need for housing in Union City
- Would like to begin FSS program for Union City residents (should be in plan)
- Replace playground equipment (danger to children), put up signs for gated play area and residents have keys only. Improve curb appeal

\*Chisa Mobley needs a larger unit and is considering Newnan, but she works and attends school in Union City and transportation is an issue.





|  |   |
|--|---|
| <b>PHA Certifications of Compliance<br/>with PHA Plans and Related<br/>Regulations</b> | <b>U.S. Department of Housing and Urban Development<br/>Office of Public and Indian Housing<br/>Expires 4/30/2011</b> |
|--|---|

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**PHA Certifications of Compliance with the PHA Plans and Related Regulations:  
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the \_\_\_ 5-Year and/or \_\_\_ Annual PHA Plan for the PHA fiscal year beginning 2010, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Housing Authority of Union City  
PHA Name

GA197  
PHA Number/HA Code

☒ 5-Year PHA Plan for Fiscal Years 20 10 - 20 14

☒ Annual PHA Plan for Fiscal Years 20 10 - 20 11

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Joann Cummings

Name of Authorized Official

Title

Joann Cummings

Signature

Vice-Chairperson

Date

11/11/09

# Certification for a Drug-Free Workplace

U.S. Department of Housing  
and Urban Development

Applicant Name

Housing Authority of Union City

Program/Activity Receiving Federal Grant Funding

Operating Subsidy/CFP

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. **Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

48 Ball Street, Newnan, GA 30263

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

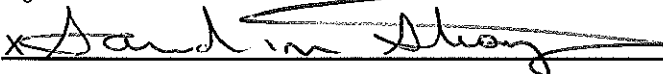
Name of Authorized Official

Sandra M. Strozier

Title

Executive Director

Signature



Date

9/16/2009

form HUD-50070 (3/98)

ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

# Certification of Payments to Influence Federal Transactions

U.S. Department of Housing  
and Urban Development  
Office of Public and Indian Housing

Applicant Name

Housing Authority of Union City

Program/Activity Receiving Federal Grant Funding

Operating Subsidy/CFP

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement..

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Sandra M. Strozier

Title

President/CEO

Signature



Date (mm/dd/yyyy)

9/16/2009

## **5-YEAR PLAN POLICY STATEMENT**

### **Violence against Women Mission**

#### **A. Mission for Violence against Women**

The mission of the Housing Authority of Union City is to provide a safe environment for women and their children free from domestic violence. To promote emergency and short term transitional housing, economic opportunity and a suitable living environment free from discrimination.

#### **The Housing Authority of Union City's Policy Statement is as follows:**

The Housing Authority of Union City, Georgia, recognizes that violence against woman is a crime. Our mission is to protect and enhance the quality of life by re-instating personal value, self respect and justice. Violence against women does not discriminate against Race, Age, Social Economic Status, Religion, Culture or Community. Our mission is to be an integral part in ending violence against woman by building a reputation for providing a safe haven and assisting family in becoming self sufficient independent of the abuser.

The objectives will be accomplished by establishing a partnership with local Community Agencies that provide Medical, Social Work, Counseling, Budgeting, Food, Clothing, Furniture, Life Skills, Interview skills, Job Search and Coping skills.

#### **B. Goals**

**HAUC Strategic Goal: To provide Emergency and Short term Transitional Housing.**

HAUC Goal: Provide immediate emergency housing not to exceed 24 hours.

Objectives:

To provide shelter for 24 hours or less until a family member or friend can be reached and provide safety for the family.

Immediate emergency shelter will be accomplished by partnering with local hotels.

HAUC Goal: Provide short term transitional housing program not to exceed 90 days.

Objectives:

To provide short term transitional housing for 90 days or less and provide family with the resources to become self sufficient.

Short term transitional housing program will be accomplished by:

- (1) Making a request to HUD to take a 5 bedroom unit off-line for transitional housing. The large bedroom unit will be adequate to house more than one family in a shared living environment.

- (2) Partnering with local community agencies to provide self-assessments, counseling and wellness screening(Temperature, blood pressure, HIV/AIDS, diabetes screening and complete physicals for children)
- (3) Partner with local churches and stores to provide food and clothing.
- (4) Provide temporary school resources for children
- (5) Resident Services to assist with job search
- (6) Weekly house meetings to set goals, share experiences, open forum and other topics. HAUC will partner with Social Workers to accomplish this objective.
- (7) Monthly assessments to be conducted
- (8) Provide an exit interview – The purpose of this interview is to get input on the program and use the data provided to continue improving the program for future participants. A written survey will be provided with a comment section and how the participant will give back to the community.

HAUC Goal: Provide permanent housing and assist family in becoming self-sufficient

**Objectives:**

To provide permanent housing and assist the family with self-sufficiency, independent of abuser.

Permanent housing will be accomplished by:

- (1) Family will apply for housing under the involuntarily displacement domestic violence preference.
- (2) Family will participate in job search and job skill programs
- (3) Family will participant in housing programs leading toward homeownership
- (4) Family will continue to participate in the available social programs.

**Civil Rights Certification**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2011

**Civil Rights Certification****Annual Certification and Board Resolution**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

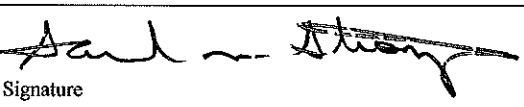
The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Housing Authority of Union City

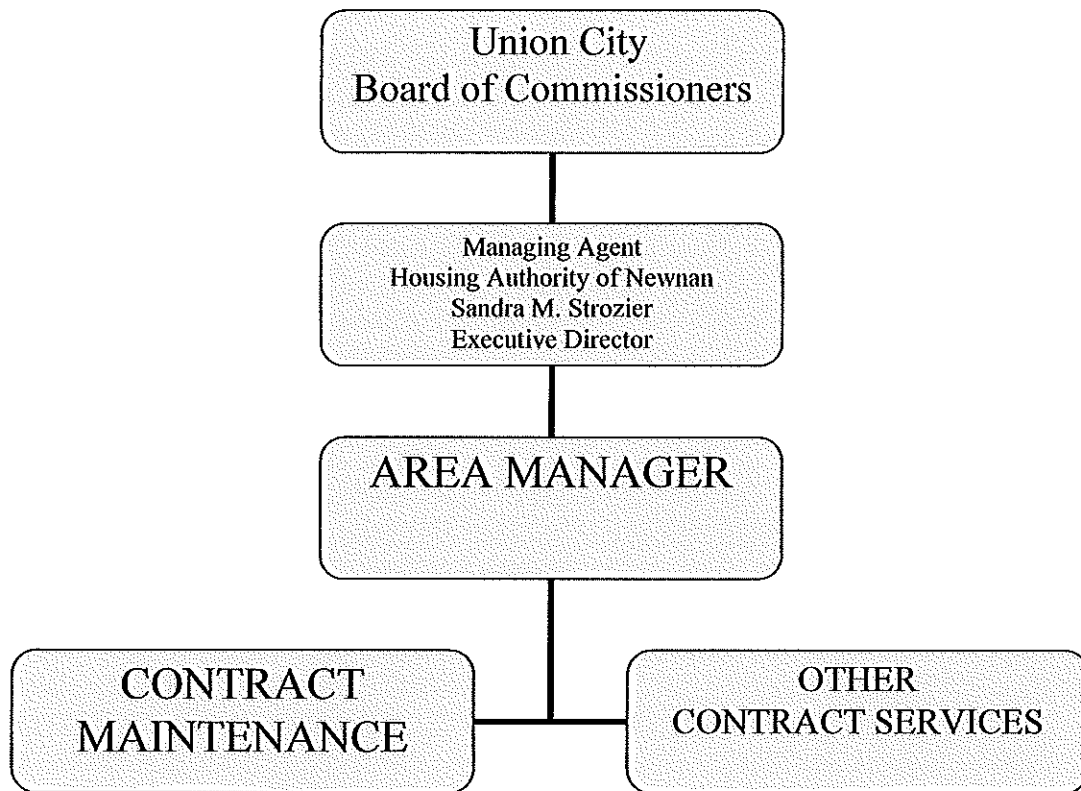
GA197

PHA Name

PHA Number/HA Code

|   |                               |
|---|-------------------------------|
| I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802) |                               |
| Name of Authorized Official<br><b>Sandra M. Strozier</b>  | Title<br><b>President/CEO</b> |
| Signature<br>  | Date<br><b>11/11/2009</b>     |





**ORGANAZATIONAL CHART**  
Housing Authority of the City of Union City  
GA  
5/1/08